

Licensure Bureau CERTIFICATE OF NEED PROGRAM MONTHLY REPORT April 2016

NAME	LOCATION	PROPOSAL	CAPITAL EXPENSE*	LOI RECEIVED	мтн	CR	APP DUE	APP RCVD	HEARING REQ/ DATE	DPHHS DECISION DEADLINE	DPHHS DECISION & DATE	REC REQ
Benefis Spectrum Medical	Havre	Expansion of home health service area	N/A	10/26/15	Nov 2015	N	3/10/16	3/9/16		6/7/16		
Immanuel Lutheran Communities	Kalispell	Renovation of a portion of existing skilled nursing facility	Over \$1.5 Million	11/30/15	Dec 2015	N	2/29/16	2/17/16		5/17/16	Y 4/6/16	
Blackfeet Tribal Nursing Home	Browning	Replace existing nursing home facility	Over \$1.5 Million	2/4/16	Mar 2016							
Beta Factor Home Care, LLC Rocky Mountain Home Care II, LLC	Butte Billings	Change of Ownership	N/A	2/29/16	N/A	NR	N/A	N/A	N/A	N/A	N/A	N/A
Bellwood Ranch, LLC	Simms	Establish inpatient chemical dependency treatment	\$25,000	3/31/16	April 2016							
Glacier County Mobile Community Healthcare	Cut Bank	Establish home health services	N/A	4/26/16	May 2016							

* First-year operating cost HHA, (may not be strictly comparable).

Name of facility in **BOLD** indicates a new request for report month.

LEGEND:

ASC Ambulatory Surgical Center

CDU Chemical Dependency Unit

CO County

CR Comparative Review

DEC Decision

DISMISS Appeal dismissed

FAC Facility

HHA Home Health Agency

H Hospital

IHS Indian Health Service

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LOI Letter of Intent

LTC Long-Term Care

MTH Month of Notice

NH Nursing Home

NR Non-Reviewable Project

N/A Not Applicable

REC REQ Reconsideration Hearing of Decision

REQ Request

SNF Skilled Nursing Facility

TBA To Be Announced

TBI Traumatic Brain Injury

10/10 Ten Bed/Ten Percent Rule (50-5-301, MCA)

N Disapproval or No Y Approval or Yes

DATES Month/Day/Year



Licensure Bureau CERTIFICATE OF NEED PROGRAM MONTHLY REPORT March 2016

NAME	LOCATION	PROPOSAL	CAPITAL EXPENSE*	LOI RECEIVED	МТН	CR	APP DUE	APP RCVD	HEARING REQ/ DATE	DPHHS DECISION DEADLINE	DPHHS DECISION & DATE	REC REQ
Benefis Spectrum Medical	Havre	Expansion of home health service area	N/A	10/26/15	Nov 2015	N	3/10/16	3/9/16		6/7/16		
Immanuel Lutheran Communities	Kalispell	Renovation of a portion of existing skilled nursing facility	Over \$1.5 Million	11/30/15	Dec 2015	N	2/29/16	2/17/16		5/17/16		
Blackfeet Tribal Nursing Home	Browning	Replace existing nursing home facility	Over \$1.5 Million	2/4/16	Mar 2016							
Beta Factor Home Care, LLC Rocky Mountain Home Care II, LLC	Butte Billings	Change of Ownership	N/A	2/29/16	N/A	NR	N/A	N/A	N/A	N/A	N/A	N/A
Bellwood Ranch, LLC	Simms	Establish inpatient chemical dependency treatment	\$25,000	3/31/16	April 2016							

LEGEND:

ASC Ambulatory Surgical Center H Hospital REC REQ Reconsideration Hearing of Decision

CDU Chemical Dependency Unit IHS Indian Health Service REQ Request

CO County LOI Letter of Intent SNF Skilled Nursing Facility

CR Comparative Review LTC Long-Term Care TBA To Be Announced

DEC Decision MTH Month of Notice TBI Traumatic Brain Injury

DISMISS Appeal dismissed **NH** Nursing Home **10/10** Ten Bed/Ten Percent Rule (50-5-301, MCA)

FAC Facility NR Non-Reviewable Project N Disapproval or No Y Approval or Yes

HHA Home Health Agency N/A Not Applicable DATES Month/Day/Year

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Licensure Bureau CERTIFICATE OF NEED PROGRAM MONTHLY REPORT February 2016

NAME	LOCATION	PROPOSAL	CAPITAL EXPENSE*	LOI RECEIVED	МТН	CR	APP DUE	APP RCVD	HEARING REQ/ DATE	DPHHS DECISION DEADLINE	DPHHS DECISION & DATE	REC REQ
Glacier Ridge Recovery & Treatment Center	Kalispell	Establish an inpatient chemical dependency treatment facility	Less than \$950,000	Revised 10/6/15	Oct 2015	N	3/10/16					
Benefis Spectrum Medical	Havre	Expansion of home health service area	N/A	10/26/15	Nov 2015	N	3/10/16					
Mountain View Care Center, Inc.	Ronan	Change of ownership	N/A	11/27/15	N/A	NR	N/A	N/A	N/A	N/A	N/A	N
Immanuel Lutheran Communities	Kalispell	Renovation of a portion of existing skilled nursing facility	Over \$1.5 Million	11/30/15	Dec 2015	N	2/29/16	2/17/16				
Blackfeet Tribal Nursing Home	Browning	Replace existing nursing home facility	Over \$1.5 Million	2/4/16	March 2016							

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LEGEND:

ASC Ambulatory Surgical Center **REC REQ** Reconsideration Hearing of Decision **H** Hospital **CDU** Chemical Dependency Unit **REQ** Request **IHS** Indian Health Service **CO** County **LOI** Letter of Intent **SNF** Skilled Nursing Facility **CR** Comparative Review LTC Long-Term Care **TBA** To Be Announced **DEC** Decision MTH Month of Notice **TBI** Traumatic Brain Injury **DISMISS** Appeal dismissed **10/10** Ten Bed/Ten Percent Rule (50-5-301, MCA) **NH** Nursing Home

FAC Facility NR Non-Reviewable Project N Disapproval or No Y Approval or Yes

HHA Home Health Agency N/A Not Applicable DATES Month/Day/Year



Licensure Bureau CERTIFICATE OF NEED PROGRAM MONTHLY REPORT

January 2016

NAME	LOCATION	PROPOSAL	CAPITAL EXPENSE*	LOI RECEIVED	МТН	CR	APP DUE	APP RCVD	HEARING REQ/ DATE	DPHHS DECISION DEADLINE	DPHHS DECISION & DATE	REC REQ
Glacier Ridge Recovery & Treatment Center	Kalispell	Establish an inpatient chemical dependency treatment facility	Less than \$950,000	Revised 10/6/15	Oct 2015	N	3/10/16					
Benefis Spectrum Medical	Havre	Expansion of home health service area	N/A	10/26/15	Nov 2015		3/10/16					
Mountain View Care Center, Inc.	Ronan	Change of ownership	N/A	11/27/15		NR						
Immanuel Lutheran Communities	Kalispell	Renovation of a portion of existing skilled nursing facility	Over \$1.5 Million	11/30/15	Dec 2015		2/29/16					

LEGEND:

ASC Ambulatory Surgical Center H Hospital REC REQ Reconsideration Hearing of Decision

CDU Chemical Dependency Unit IHS Indian Health Service REQ Request

CO County LOI Letter of Intent SNF Skilled Nursing Facility

CR Comparative Review LTC Long-Term Care TBA To Be Announced

DEC Decision MTH Month of Notice TBI Traumatic Brain Injury

DISMISS Appeal dismissed **NH** Nursing Home **10/10** Ten Bed/Ten Percent Rule (50-5-301,MCA)

FAC Facility NR Non-Reviewable Project N Disapproval or No Y Approval or Yes

HHA Home Health Agency N/A Not Applicable DATES Month/Day/Year

Name of facility in **BOLD** indicates a new request for report month

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